

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

Weekly Bulletin



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GUY P. JONES
EDITOR

Enforcement of State and Federal Food Laws

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The question has been asked quite frequently of late "Why is it necessary to have a state bureau for the enforcement of the Food and Drugs Act when the United States Government has such an efficient organization for carrying on the same kind of activity? Is this not a duplication of work entailing an unnecessary expenditure of state funds?"

The reasons for maintaining these separate organizations are twofold.

The federal government has jurisdiction *only* over sale of food and drugs which are manufactured in *one state* and sold in *others*. It has no authority over sale of products which are sold *only* in the state in which they are manufactured. In other words, the federal enforcement of pure food and drugs act is limited to interstate trade.

The state again has only very limited jurisdiction in regard to manufacture and sale of any food or drug product if *not* sold in same state as manufactured, but sold in another commonwealth.

It would be extremely difficult for California to protect itself from impure products manufactured in another state and shipped into this state without the aid of the federal enforcement.

If, again, there were no separate state food and drugs laws, the federal authorities would be powerless to protect the people of a state from adulterated products which were both manufactured and sold within the confines of that state. Thus the benefits, to the consumer, of the federal laws would often be nullified.

An equivalent hardship would result from impure products manufactured in California but sold in other

states. The entire burden would be thrown on the shoulders of federal authorities were it not for the California state act which makes it unlawful for any manufacturer or dealer to have *in his possession* food products which do not conform to the law, even though they are not intended for sale in this state. Such products can be seized and quarantined by the state officials, thus saving the federal authorities the effort of seeking them out in the "hundred corners" in which they may be found.

Among the many instances which could be given in connection with the foregoing may be mentioned:

Evaporated or condensed milk. This important dairy product is prepared in California and marketed all over the United States. Were it not for the activity of the federal government the standard and purity of evaporated milk would not be safeguarded all over the country.

Bakery products. In California by far the main part of bakery products made in California are sold only in this state. Therefore, there is no necessity for the intervention of the federal law. The state act is quite sufficient to meet the situation.

Similarly with reference to the manufacture and sale of *ice cream*. It may be of interest in passing to state that the federal government has suspended indefinitely the standards for ice cream as there is so little of this food entering interstate traffic. At the same time it should be emphasized that the state should maintain efficient inspection of ice cream owing to its high nutritional value.

Such a discussion as this would not be complete without a word in reference to the cordial coopera-

tion existing between the federal and state organizations. This cooperation is vital to the successful enforcement of both sets of laws and, therefore, to the ultimate benefit of the consumer. If a state inspector meets with any mislabeled or adulterated food or drug product which is manufactured outside the state, the same is referred to the Federal Bureau, and vice versa. When a federal inspector finds any violation of the state law he refers it to the State Bureau of Food and Drugs. In this way immediate action is had. The value of such cooperation is appreciated, when it is realized that the number of state inspectors is very small, and similarly with reference to the federal inspectors in California. This cooperation has been very effective in removing from sale mislabeled and adulterated drugs manufactured in the east and offered for sale in California. It has also been more than useful in *immediately* eliminating from the California market adulterated foods which otherwise might not have come to the attention of the state inspector until much later.

While discussing the subject of cooperation between federal and state officials, it might not be out of place to say a word in regard to the cooperation existing between the state and city, county and district health officials. There is the same type of relationship between the laws governing state, county and city officials as there is between those governing the federal and state departments. The state can not interfere with either city or county laws, provided, of course, that said laws are constitutional. For example, the state standard for milk fat in milk is 3 per cent, but there are many municipalities which have enacted statutes requiring more than 3 per cent as the standard.

A state inspector would have no right, unless specially invited to inspect any locality well organized for such purposes. But if in said locality there were situated factories for making products for sale outside of its limits, then the state man would have the right to inspect such an establishment.

Were it not for such active and cordial intrastate cooperation the results of the work of the State Bureau of Food and Drugs would not be as good as they are.

Every state health officer is empowered by law to enforce any and all state laws relating to sanitary matters, such as the "Food Sanitation Act," "The Sanitary Bakery Law," etc.

In this connection it should be said that no request for cooperation on the part of any health officer in the state has been refused. Far from it. The response has been very cooperative, and the action immediate.

ACTIVITIES IN CHILD HYGIENE ARE EXTENSIVE

During the year which closed June 30, 1930, a total of 10,817 examinations were made by the staff of physicians of the Bureau of Child Hygiene. Of these, 7283 were in children who were examined for the first time and the remainder of 3534 were return examinations. Nearly all of these children are residents of the rural districts and a great many of them are in the remote mountain territory where facilities for proper physical examinations are lacking. All of the children were less than six years of age. Of the total number examined nearly 3000 were under one year of age; 2000 were between the ages of one and two; and 6000 were children who were between the ages of 2 and 6.

MATERNITY HOMES AND HOSPITALS

During the year which ended June 30, 1930, the Bureau of Child Hygiene inspected and licensed a total of 433 maternity homes and hospitals. Of this number 247 hospitals and 108 homes already held licenses to operate. Fifty-two hospitals and 26 homes were licensed after having been inspected for the first time.

PRENATAL INSTITUTE

During the year the Bureau of Child Hygiene conducted prenatal institutes for nurses in Sacramento, Stockton, Los Angeles, Santa Barbara, San Francisco, Oakland and Fresno. These institutes were conducted for the purpose of demonstrating proper technique in prenatal care. A total of 762 nurses attended the institutes.

DISTRIBUTION OF LITERATURE

During the year a total of 131,237 pieces of literature were distributed to doctors, nurses and prospective mothers. At the end of the fiscal year 900 prospective mothers are on the mailing list to receive the monthly prenatal letters which are distributed by the Bureau. A mailing list of 4400 mothers is also receiving monthly letters on infant care, which are distributed by the Bureau without cost.

It is the mind that is really alive and sees things, yet it hardly sees anything without preliminary instruction.—*Charcot*.

Again, in view of the small personnel of the staff of state food and drug inspectors, the value of such cooperation is fully realized and appreciated. Not only has this cooperation been most successful in connection with all food sanitation matters, but also in the large centers with reference to the enforcement of the food and drugs acts of the state.

SANITATION OF RECREATIONAL GROUNDS

A recent inspection by the Bureau of Sanitary Engineering of the recreational water-sheds of Southern California revealed that these watersheds are maintained in a state of excellent sanitation in spite of the fact that they were occupied at the time of inspection by at least 25,000 people. It is apparent that the individuals who go to these places for recreation have a high regard for the sanitation of the districts which they occupy and maintain a conscientious attitude toward the necessity for preventing the pollution of streams. The sanitary inspectors of the State Department of Public Health and the employees of the United States Forest Service have for years conducted an active campaign of education among individuals who visit these recreational grounds. The inspection just completed shows that swimming and wading in the streams has been discontinued completely. The inspection revealed the fact that a number of recreationists had placed watermelons and lunches in the streams to cool and upon being reminded that the streams were used for drinking water such articles were removed from the streams without hesitation or remonstrance. It is apparent that the campaign of education which has been conducted incessantly for a long period of time has produced results that are conspicuous in the promotion of sanitation in these important watersheds. Individuals who seek these places for recreation show that they are informed regarding the best sanitary practices and that they observe the regulations implicitly. The cooperation of the general public in the prevention of stream pollution alone is a factor of great importance in the making of the state's excellent record in the control of typhoid fever and other communicable diseases.

MISS MURRAY JOINS WESTCHESTER COUNTY UNIT

Ethel Frances Murray, public health nurse, who was for many years on the staff of the Bureau of Child Hygiene of the State Department of Public Health, has been appointed chief nurse of the Westchester County Health Department in New York state. This is the county department to become the head of which Dr. Matthias Nicoll resigned as Health Commissioner of the state of New York. Miss Murray, last year, completed postgraduate work in the University of Washington, since which time she has been engaged in public health work in New Jersey.

John Hunter, when challenged regarding an inconsistency in his teaching, replied: "Perhaps I did say so and so. I hope I grow wiser every year."

MUSSEL AND CLAM QUARANTINE

The general public has been warned of the danger in eating mussels at this season and no cases of poisoning from the use of mussels or clams have occurred in any human beings in California during the present year. Laboratory examination of mussels and clams gathered along the California coast proves that they are highly toxic. It, therefore, became necessary, on July 11, for the State Department of Public Health to establish a quarantine upon mussels that might be gathered along the coast of San Mateo County. Conditions revealed by later examinations made necessary, on July 16, the establishment of a quarantine upon clams as well as mussels and the territory covered by the quarantine was extended from Monterey County to Del Norte County, exclusive of the San Francisco Bay shore. All health officers and food inspectors were instructed, until further notice, to enforce the provisions of this quarantine and to prohibit the sale or offering for sale of mussels or clams gathered within the district specified in the quarantine order. No commercially packed shellfish have been involved so far in cases of either clam or mussel poisoning. All cases that have occurred in California, during past years, have occurred among individuals who ate shellfish which were gathered on picnic and beach parties.

CHANGES AMONG HEALTH OFFICERS

Dr. Harold G. Gentry succeeds Dr. K. L. Dole as city health officer of Redlands.

Dr. J. H. Hanson succeeds Dr. Chas. B. Hopkins as city health officer of Ukiah.

Dr. Warren F. Fox succeeds Dr. H. V. Gray as health officer of Imperial County.

Dr. S. Iglick succeeds Dr. F. M. Lawson as health officer of Glenn County.

If any one thing, however, has been settled in this realm of thought by unison of opinion, it is the state-wide extension of the interest in the maintenance of life and health. The advancement of that interest, like the advancement of education, is a function of the state at large.—*Chief Justice Cardozo*, N. Y. Court of Appeals.

MORBIDITY *

Diphtheria.

43 cases of diphtheria have been reported, as follows: Livermore 1, Oakland 3, Contra Costa County 1, Kern County 1, Lake County 1, Los Angeles County 9, Azusa 1, Covina 1, Glendale 1, Long Beach 1, Los Angeles 7, Santa Monica 1, South Gate 1, Monterey Park 1, Mono County 1, Santa Ana 2, Riverside 1, Sacramento County 1, Sacramento 1, Colton 1, San Diego County 1, San Francisco 4, San Jose 1.

* From reports received on July 21st and 22d for the week ending July 19th.

Measles.

326 cases of measles have been reported, as follows: Alameda County 2, Berkeley 6, Hayward 7, Oakland 5, Piedmont 2, Chico 1, Contra Costa County 4, Fresno County 1, Fresno 2, Kern County 1, Los Angeles County 23, Alhambra 2, Azusa 1, Glendale 3, Glendora 2, Huntington Park 1, Inglewood 1, Long Beach 16, Los Angeles 71, Monrovia 1, Pasadena 5, Pomona 2, San Fernando 1, Santa Monica 10, Whittier 3, Torrance 2, Lynwood 3, Hawthorne 2, South Gate 3, Maywood 1, Bell 4, Marin County 1, Orange County 2, Anaheim 2, Fullerton 1, Huntington Beach 2, Santa Ana 3, La Habra 1, Laguna Beach 2, Riverside County 4, Sacramento 7, Ontario 4, San Bernardino 1, San Diego County 14, Escondido 1, San Diego 55, San Francisco 10, San Joaquin County 6, Stockton 1, Tracy 1, Santa Barbara County 3, Palo Alto 11, Watsonville 2, Tulare County 2, Visalia 2.

Scarlet Fever.

40 cases of scarlet fever have been reported, as follows: Berkeley 1, Oakland 1, Eureka 1, Kern County 1, Kings County 1, Los Angeles County 2, Compton 1, Glendale 2, Long Beach 1, Los Angeles 14, Salinas 1, Orange County 1, Sacramento 3, Hollister 2, Colton 1, San Diego 2, San Francisco 4, Sonoma County 1.

Smallpox.

18 cases of smallpox have been reported, as follows: Oakland 1, Fresno 1, Bakersfield 1, Lassen County 1, Los Angeles County 1, Compton 2, Inglewood 1, Riverside County 1, Sacramento 3, San Diego County 4, San Francisco 1, Stanislaus County 1.

Whooping Cough.

164 cases of whooping cough have been reported, as follows: Alameda 4, Albany 1, Berkeley 1, Oakland 2, Fresno County 1,

Los Angeles County 11, Azusa 1, Glendale 5, Glendora 2, Los Angeles 34, Montebello 1, Pasadena 4, Santa Monica 14, Hawthorne 1, Maywood 2, Madera County 1, Marin County 1, Orange County 4, Brea 1, Fullerton 4, Santa Ana 1, Riverside County 8, Riverside 3, Sacramento 3, San Diego County 1, San Diego 28, San Francisco 1, San Joaquin County 3, Stockton 2, San Luis Obispo County 4, San Luis Obispo 2, Santa Barbara County 2, San Jose 9, Yuba City 1, Tulare County 1.

Meningitis (Epidemic).

Kern County reported one case of epidemic meningitis.

Typhoid Fever.

15 cases of typhoid fever have been reported as follows: Taft 1, Los Angeles 3, Riverside County 1, Sacramento 2, San Diego County 3, San Francisco 1, San Joaquin County 1, Stockton 1, Porterville 1, California 1.**

Poliomyelitis.

98 cases of poliomyelitis have been reported, as follows: Fresno County 1, Kern County 2, Bakersfield 1, Los Angeles County 18, Alhambra 1, Beverly Hills 1, Covina 1, Glendale 15, Huntington Park 1, Long Beach 4, Los Angeles 31, Manhattan 1, Montebello 1, Pasadena 1, Pomona 1, Santa Monica 1, South Gate 3, Orange County 1, Laguna Beach 1, Riverside County 3, Riverside 1, San Bernardino County 1, San Diego County 1, San Francisco 1, Santa Barbara County 2, Lompoc 2, Santa Barbara 1.

Undulant Fever.

2 cases of undulant fever have been reported, as follows: Orange County 1, and Ontario 1.

** Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

COMMUNICABLE DISEASE REPORTS

Disease	1930				1929			
	Week ending			Reports for week ending July 19 received by July 22	Week ending			Reports for week ending July 20 received by July 23
	June 28	July 5	July 12		June 29	July 6	July 13	
Actinomycosis	1	0	0	0	0	0	0	0
Chickenpox	116	115	117	53	243	104	110	73
Coccidioid Granuloma	0	0	0	0	1	0	0	2
Dengue	0	0	0	0	0	1	0	0
Diphtheria	57	41	54	43	62	38	52	37
Dysentery (Amoebic)	2	1	1	1	3	2	0	0
Dysentery (Bacillary)	13	5	11	2	7	3	1	8
Encephalitis (Epidemic)	0	0	1	0	5	1	1	2
Erysipelas	16	15	12	10	24	4	11	11
Food Poisoning	2	0	7	0	0	0	1	0
German Measles	4	9	9	3	15	5	14	11
Glanders	0	0	0	0	0	0	0	0
Gonococcus Infection	104	124	128	167	94	94	94	102
Hookworm	0	0	0	0	0	0	0	0
Influenza	26	22	19	21	21	9	6	5
Jaundice (Epidemic)	1	2	0	0	0	0	0	0
Leprosy	2	0	1	0	0	0	0	0
Malaria	1	1	0	1	3	0	2	2
Measles	1,024	690	574	326	104	74	81	39
Meningitis (Epidemic)	5	2	4	1	9	13	4	15
Mumps	240	169	177	162	194	124	148	104
Ophthalmia Neonatorum	0	0	0	0	2	0	0	2
Paratyphoid Fever	1	2	2	0	1	2	2	2
Pellagra	7	2	2	0	2	1	1	1
Pneumonia (Lobar)	78	23	30	20	96	43	35	32
Poliomyelitis	78	96	98	98	5	4	5	5
Rabies (Animal)	24	16	10	17	13	18	14	14
Rocky Mt. Spotted Fever	1	1	0	0	0	0	5	0
Scarlet Fever	68	41	50	40	192	131	103	96
Smallpox	43	17	35	18	18	33	22	16
Syphilis	133	118	129	162	105	211	104	110
Tetanus	1	1	1	1	1	1	0	1
Trachoma	3	0	3	1	0	0	2	2
Trichinosis	0	0	3	0	0	0	0	0
Tuberculosis	255	194	210	150	169	154	167	169
Tularemia	0	0	0	0	2	1	0	0
Typhoid Fever	23	12	22	15	16	4	14	10
Undulant Fever	2	3	3	2	3	1	0	0
Whooping Cough	161	143	117	164	188	134	144	149
Totals	2,492	1,865	1,830	1,478	1,598	1,210	1,143	1,020



Epidemic Poliomyelitis remains at a stationary level.



Measles shows a considerable falling off.



Smallpox is less prevalent.



Most of the reportable diseases are decreased in prevalence.

